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DATE: 2/2/05

ATTORNEY DOCKET NO: 23546-7665
(RTS-274)

To:

| NAME | FAX NO. | PHONE NO. |
|---------------------------------|----------------|-----------|
| Sean McBarry, GAL 1635 USPTO | (703) 872-9306 | |

FROM: Susan T. Hubl, Ph.D.
Patent Agent

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NUMBER OF PAGES WITH COVER PAGE: 8

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MESSAGE:

See attached Response / Amendment
USSN 10/006, 191
AFTER FINAL

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|--|--|--|------------------------|-----------------------|----------------------|
| 0001/PTO Rev. 10/95 | | U.S. Department of Commerce Patent and Trademark Office | | Application Number | 10/006,191 |
| TRANSMITTAL FORM <i>(to be used for all correspondence during pendency of filed application)</i> | | | | Filing Date | 12/10/2001 |
| | | | | First Named Inventor | Guardee |
| | | | | Group Art Unit Number | 1635 |
| | | | | Examiner Name | McGarry |
| Total Number of Pages in This Submission: | | 8 | Attorney Docket Number | | 23546-7665 (RTS-274) |

| ENCLOSURES (check all that apply) | |
|--|--|
| <input type="checkbox"/> Fee Transmittal Form (in duplicate) <input type="checkbox"/> Check Enclosed <input checked="" type="checkbox"/> FAX cover sheet <input type="checkbox"/> Response to Notice to File Missing Parts <input type="checkbox"/> Assignment & Recordation Cover Sheet <input type="checkbox"/> Declaration <input type="checkbox"/> Power of Attorney <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Information Disclosure Statement & PTO/SB/08A <input type="checkbox"/> Copies of IDS Cited References <input type="checkbox"/> Request for Corrected Filing Receipt <input type="checkbox"/> Request for Correction of Recorded Assignment <input checked="" type="checkbox"/> Amendment/Response: [6] Page(s) <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Status Request <input type="checkbox"/> Revocation and Substitute Power of Attorney | <input type="checkbox"/> Issue Fee Transmittal <input type="checkbox"/> Letter to Chief Draftsperson <input type="checkbox"/> Formal Drawing(s): [] Sheet(s) of Figure(s) [] <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i> <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ |
| REMARKS: | |

| SIGNATURE OF ATTORNEY OR AGENT | | | |
|--------------------------------|--|--------|--------|
| Signature: | <i>Susan T. Hubl</i> | | |
| Attorney/Reg. No.: | Susan T. Hubl, Ph.D., Patent Agent/ USPTO Reg No. 47,668 | Dated: | 2/2/05 |

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| I hereby certify that this correspondence, including the enclosures identified above, is being transmitted on the date shown below via facsimile to: Commissioner for Patents at the facsimile number indicated below. | | | |
| Signature: | <i>Susan T. Hubl</i> | | |
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|---|---|
| APPLICANT(S): | GAARDE ET AL |
| APPLN NO.: | 10/006,191 |
| FILING DATE: | 12/10/2001 |
| TITLE: | ANTISENSE MODULATION OF CONNECTIVE TISSUE GROWTH FACTOR EXPRESSION |
| EXAMINER: | MCGARRY |
| GAU: | 1635 |
| ATTY. DKT. NO.: | 23546-07665/US (RTS-274) |
| CERTIFICATE OF TRANSMISSION I hereby certify that this correspondence is being transmitted on the date shown below via facsimile to the attention of: Examiner McGarry at facsimile number 703-872-9306. Dated: <u>February 2, 2005</u> By: <u>Susan T. Hubl</u> Susan T. Hubl, Reg. No.: 47,668 | |

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RESPONSE/AMENDMENT AFTER FINAL

SIR:

Responsive to the Final Office Action dated December 2, 2004 received in the above-identified patent application, please enter the following amendments, and consider the accompanying remarks.

Amendments to the Claims begin on page 2. Remarks begin on page 4.

23546/07665/SF/5136701.1